AMENDMENTS TO THE CLAIMS

Please replace all prior versions and listings of claims in the application with the following list of claims.

(Currently amended) A method for eharacterizing predicting an apparently healthy
individual's risk profile of developing future diabetes or a diabetic complication, comprising:

obtaining a level of C-reactive protein in a blood sample from the individual, and if said level of C-reactive protein is about 0.30 mg/dl or higher in the blood sample from the individual, then

eharacterizing predicting said individual as having an increased risk of developing future diabetes or a diabetic complication, wherein the diabetic complication is diabetic ketoacidosis, hyperosmolar coma, retinopathy, diabetic nephropathy, diabetic neuropathy, or diabetic foot ulcers, and wherein said individual is free of diabetes.

2-5. (Canceled)

 (Previously presented) The method of claim 1, wherein the level of C-reactive protein is about 0.60 mg/dl or higher in the blood sample from the individual.

7-10. (Canceled)

11. (Currently amended) A method for eharacterizing predicting an individual's risk profile of developing future diabetes or a diabetic complication, comprising:

obtaining a level of C-reactive protein in a blood sample from the individual, wherein a level of C-reactive protein about 0.30 mg/dl or higher in the blood sample from the individual establishes a first risk value.

obtaining a level of a glycosylated hemoglobin in a blood sample from the individual, comparing the level of the glycosylated hemoglobin to a second predetermined value specific for the diagnosis of diabetes or a diabetic complication to establish a second risk value, and

eharacterizing predicting the individual's risk profile of developing diabetes or a diabetic complication based upon the combination of the first risk value and the second risk value, wherein the combination of the first risk value and second risk value establishes a third risk value different from said first and second risk values, and wherein said individual is free of diabetes.

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12-15. (Canceled)

 (Previously presented) The method of claim 11, wherein the level of C-reactive protein is about 0.60 mg/dl or higher in the blood sample of the individual.

17-20. (Canceled)

21. (Currently amended) A method for evaluating the likelihood that an individual will benefit from treatment with an agent for reducing the risk of diabetes or one or more diabetic eemplications, wherein the agent is insulin, a hypoglycemic agent, an anti-inflammatory agent, a lipid lowering agent, a calcium channel blocker, a beta-adrenergic receptor blocker, a evelooxygenase-2 inhibitor, or an angiotensin system inhibitor, comprising:

obtaining a level of C-reactive protein in a blood sample from the individual, and if said level of C-reactive protein is about 0.30 mg/dl or higher in the blood sample from the individual, then

eharacterizing predicting said individual as likely to benefit from treatment with said agents, wherein the diabetic complications are diabetic ketoacidosis, hyperosmolar coma, retinopathy, diabetic nephropathy, diabetic neuropathy, or diabetic foot ulcers, wherein said individual is free of diabetes, and wherein the lipid lowering agent is not an HMG-CoA reductase inhibitor.

22-51. (Canceled)

52. (Previously presented) The method of claim 21, wherein the agent is a hypoglycemic agent.

53-54. (Canceled)

55. (Previously presented) The method of claim 21, wherein the level of C-reactive protein is about 0.60 mg/dL or higher in the blood sample from the individual.

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- (Canceled)
- 57. (Previously presented) The method of claim 21, wherein the agent is insulin.
- 58-61. (Canceled)
- (Previously presented) The method of claim 21, wherein the agent is an anti-inflammatory agent.
- 63. (Previously presented) The method of claim 21, wherein the agent is a lipid lowering agent.
- 64. (Previously presented) The method of claim 21, wherein the agent is a calcium channel blocker.
- (Previously presented) The method of claim 21, wherein the agent is a beta-adrenergic receptor blocker.
- 66. (Previously presented) The method of claim 21, wherein the agent is a cyclooxygenase-2 inhibitor.
- 67. (Previously presented) The method of claim 21, wherein the agent is an angiotensin system inhibitor.
- 68. (Currently amended) A method for evaluating the likelihood that an individual will benefit from treatment with an agent for reducing the risk of one or more diabetic complications, wherein the agent is insulin, [[or]] a hypoglycemic agent, an anti-inflammatory agent, a lipid lowering agent.

a calcium channel blocker, a beta-adrenergic receptor blocker, a cyclooxygenase-2 inhibitor, or an angiotensin system inhibitor, comprising:

obtaining a level of C-reactive protein in a blood sample from the individual, and if said level of C-reactive protein is about 0.30 mg/dl or higher in the blood sample from the individual, then

eharacterizing predicting said individual as likely to benefit from treatment with said agent, wherein the diabetic complications are diabetic ketoacidosis, hyperosmolar coma, retinopathy, diabetic nephropathy, diabetic neuropathy, or diabetic foot ulcers.

- 69-70. (Canceled)
- (Previously presented) The method of claim 1, wherein the diabetes or a diabetic complication is diabetes.
- (Previously presented) The method of claim 1, wherein the diabetes or a diabetic complication is a diabetic complication.
- (Previously presented) The method of claim 11, wherein the diabetes or a diabetic complication is diabetes.
- 74. (Previously presented) The method of claim 11, wherein the diabetes or a diabetic complication is a diabetic complication.
- 75. (Previously presented) The method of claim 21, wherein the agent is an agent for reducing the risk of diabetes.
- (Cancelled)